

PRINTED: 07/14/2008
FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 09G218	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 06/19/2008
NAME OF PROVIDER OR SUPPLIER WHOLISTIC SERVICES, X			STREET ADDRESS, CITY, STATE, ZIP CODE 1419 VAN BUREN STREET, NW WASHINGTON, DC 20012		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
I 000	INITIAL COMMENTS An initial licensure survey was conducted on June 19, 2008. Five residents resides at this facility. The findings of the survey were based on interviews with the facility's owners, House Manger, Maintenance Supervisor, Licensed Practical Nurse, and review of administrative/client records. An environmental inspection was conducted also. There were environmental deficiencies noted during this inspection.	I 000			
I 022	3501.5 ENVIRONMENTAL REQ / USE OF SPACE Each window shall be supplied with curtains, shades or blinds, which are kept clean, and in good repair. This Statute is not met as evidenced by: Based on observation and interview, the GHMRP failed to ensure blinds and curtains at each window. The findings include: Observation of the environment conducted on June 19, 2008 at beginning at 1:49 PM revealed the following: 1. No curtains, blinds or shades were observed in Client #4 and #5's bathroom. 2. The blinds throughout the facility were observed with tears and missing slats..	I 022	<p>2008 JUL 28 A 10:29</p> <p>RECEIVED DEPARTMENT OF HEALTH HEALTH REGULATION ADMINISTRATION</p> <p>I 022:1 Window curtains have been fixed in client #4 and #5's bathroom. 06/23/08</p> <p>I 022:2 The blinds have been replaced. 06/23/08</p>		
I 058	3502.14 MEAL SERVICE / DINING AREAS Each GHMRP shall train staff in the storage, preparation and serving of food, the cleaning and	I 058			

Health Regulation Administration

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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TITLE

Vice President

7/24/08

(X6) DATE

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I 058	Continued From page 1 care of equipment, and food preparation in order to maintain sanitary conditions at all times. This Statute is not met as evidenced by: Based on observation, the facility failed to ensure that each GHMRP stored food properly after each use. The finding includes: Observations of the kitchen conducted on June 19, 2008 at approximately 1:35 PM revealed the following: 1. Duck tape was observed to act a covering for Potato Buds. (Mash Potatoes) in the cabinet. It should be noted that all cabinets had rodent devices to keep the roaches away. 2. Town house crackers, two boxes of vanilla cookies, and Cheez-It Crackers was observed open inside the cabinets. 3. Four boxes of cereal was observed to be open on top of the refrigerator.	I 058			
I 082	3502.20 MEAL SERVICE / DINING AREAS Dishes and eating utensils shall be cleaned after each meal and stored to maintain their sanitary condition. This Statute is not met as evidenced by: Based on observation and interview the GHMRP failed to ensure baking pans were maintained in a sanitary manner. The finding includes:	I 082	I 058:1, 2, 3. Staff have been in-serviced on proper storage of food. The house manager will on weekly basis conduct food audits to ensure that all opened foods are properly stored. 06/23/08		

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I 062	Continued From page 2 During the environmental inspection on June 19, 2008 at approximately 1:47 PM revealed two baking pans underneath the cabinet that had burn on food particles and rust.	I 062			
I 082	3503.10 BEDROOMS AND BATHROOMS Each bathroom that is used by residents shall be equipped with toilet tissue, a paper towel and cup dispenser, soap for hand washing, a mirror and adequate lighting. This Statute is not met as evidenced by: Based on observations and interview at the GHMRP failed properly equip each bathroom with the appropriate items to meet each residents need. The findings include: During the environmental inspection on June 19, 2008M revealed the following: 1. There was no cups or cup dispenser located in the bathroom observed on the second level in Resident #4 and #5's bathroom. 2. There was no cups or cup dispenser located in the bathroom the second level.	I 082			
I 090	3504.1 HOUSEKEEPING The interior and exterior of each GHMRP shall be maintained in a safe, clean, orderly, attractive, and sanitary manner and be free of accumulations of dirt, rubbish, and objectionable odors.	I 090			

I 082:1, 2.
All bathrooms have been fully equipped with cup dispensers.
The House Manager will on a monthly basis conduct environmental audits to ensure compliance.
06/23/08

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I 090	Continued From page 3 This Statute is not met as evidenced by: Based on observation, the GHMRP failed to ensure the interior and exterior of the GHMRP was maintained in a safe, clean, orderly, attractive, and sanitary manner and be free of accumulations of dirt, rubbish, and objectionable odors. The finding includes: Observations of the GHMRP 's environment on June 19, 2008 revealed the following: Interior 1. There was chipping paint observed on the wall above the line closet. 2. Nails were exposed in the steps leading to the second level. 3. A whole was observed in the floor of a step in the stairwell. 4. Cracks were exposed in the base board along the wall in the stairwell. 5. The radiator cover in the living room was observed broken and detached from the radiator. 6. Open space were observed long the baseboard of the living room floor, measuring approximately one inch from the hard wood flooring exposing the subfloor. 7. Floor cracks were observed in the dining area along the baseboard.	I 090	I 090, 1 (Interior) The chipping paints have been cleaned off and the walls painted. 06/25/08 I 090, 2 Protruding nails have been removed. 06/25/08 I 090, 3 The hole in the floor of the Step in the stairwell has been closed. 06/25/08 I 090, 4 The cracks in the baseboard wall in the stairwell have been sealed. 06/25/08 I 090, 5 The whole radiator component has been replaced. 06/25/08 I 090, 6 All open areas in the living room hardwood floor have been sealed 06/25/08 I 090, 7 The floor in the dining room area has been glazed and polished. 06/25/08	

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Note: Starting August 2008, Wholistic Services X will be conducting environmental audits on a monthly basis so as to ensure compliance.

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I 090	Continued From page 4 8. Open space was observed between the baseboard and hardwood flooring in the resident's bedroom. The spaces measured approximately a half inch. 9. Open space were observed between the baseboard and hardwood flooring measuring approximately a half inch located in the exercise room. 10. Cracked and chipped caulking was observed in Resident #3's bedroom to the left of the air condition. 11. Each bedroom windows on the second level was observed with an accumulation of dust. The blinds were also dusty. 12. Broken shelves was observed inside Client #4 and #5's bathroom cabinets. Exterior 1. The Iron rail located near the bottom of the front porch was loose. 2. The front entrance door screen was torn. 3. The front of the facility needed to be painted.	I 090	I 090, 8 (Interior Continues) The open areas in the residents' bedrooms have been sealed. 06/25/08 I 090, 9 The open areas in the exercise area have been sealed. 06/25/08 I 090, 10 The cracked and chipped caulking have been repaired and the room has been painted. 06/25/08 I 090, 11 The bedroom windows on the second floor have been cleaned and the walls painted. 06/25/08		
I 095	3504.6 HOUSEKEEPING Each poison and caustic agent shall be stored in a locked cabinet and shall be out of direct reach of each resident. This Statute is not met as evidenced by: Based on observation and interview revealed that	I 095	I 090, 12 The broken shelves in client #4 and #5's bathroom cabinets have been repaired. 06/25/08		

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I 095	Continued From page 5 the GHMRP failed to ensure that caustic agents were stored in a locked cabinet. The finding includes: During the environmental walk-thru on June 19, 2008 disinfectant spray was observed underneath the bathrooms throughout the facility. Floor cleaning solution containing caustic agent was also observed underneath the cabinets.	I 095	<div style="border: 1px solid black; padding: 5px;"> I 090, 1 (Exterior) The iron rail near the bottom of the porch has been well fitted. <div style="text-align: right;">06/26/08</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> I 090, 2 The front entrance screen has been replaced. <div style="text-align: right;">06/26/08</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> I 090, 3 The front of the facility will be painted by 08/15/08. <div style="text-align: right;">08/15/08</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> I 095 Disinfectant spray, bleach, and floor cleaning solutions have been locked up in the basement. Staff have been in-service on proper storage of hazardous reagents. <div style="text-align: right;">07/15/08</div> </div>		